

ISDH 2003 Hospital Service Report

(Annual Report under Indiana Code 16-21-6)

Lafayette Home HospitalCity: Lafayette County: Tippecanoe Year: **2003**

Provider Type: General Acute

I. Inpatient Care				
Hospital Service Description	Number of Set Up Beds	Number of Discharges	Number of Patient Days	Average Charge Per Discharge
Burn Care	0	0	0	\$0
Cardiac Intensive	0	0	0	\$0
ICU Med/Surg	14	201	2,639	\$22,841
ICU Neonatal	14	335	4,382	\$21,551
ICU Pediatric	0	0	0	\$0
Medical/Surgical	152	6,110	26,486	\$2,224
Neonatal Intermed	0	0	0	\$0
Obstetrics	21	3,076	5,930	\$942
Pediatric	20	790	1,871	\$1,091

Psychiatric	0	0	0	\$0
Rehabilitation	18	498	4,556	\$8,688
Substance Abuse	0	0	0	\$0
Swing Beds	NA	0	0	\$0
Other Services	0	0	0	NA
Acute Subtotal	239	11,010	45,864	NA
Normal Newborn	24	2,761	5,877	\$765

II. Outpatient Visits			
Circulatory System	6,432	Digestive System	951
Endocrine System	165	Injuries and Poison	5,346
Mental Disorder	40	Musculoskeletal	22
Neoplasms	1,072	Nervous	367
Respiratory	1,363	Urinary	232
Other/Unknown	77,858	Total Visits	93,848
Number of Visits to Emergency Department			37,390
Percent of Emergency Department Visits of Total Visits			39.8%

Identification of Hospital Services

Each hospital has identified if it has one or more of a standard list of 41 services. This list of services is updated annually by each hospital from the information initially requested by the Centers for Medicare & Medicaid Services when the hospital was initially certified for Medicare payment.

Y - Acute Renal Dialysis	N - Alcohol/Drug Service	Y - Anesthesia Services
Y - Blood Bank	N - Burn Care Unit	N - Chiropractic Service
N - Coronary Care Unit	N - Dental Services	Y - Dietetic Services
Y - Emergency Service	Y - Home Care Program	N - Hospice
Y - Inpatient Surgical Services	Y - Intensive Care Unit	Y - Laboratory(Clinical)
Y - Laboratory(Anatomical)	N - Long Term Care Unit	Y - Neonatal Nursery
N - Nuclear Medicine Services	Y - Obstetrics Services	
Y - Occupational Therapy	N - Open Heart Surgery	Y - Operating Room
N - Optometric Service	N - Organ Bank	N - Organ Transplant
Y - Outpatient Service	Y - Outpatient Surgery Unit	Y - Pediatric Services
Y - Pharmacy	Y - Physical Therapy	Y - Postoperative Recovery
Y - Psychiatric Services	Y - Radiology(Diagnostic)	Y - Radiology(Therapeutic)
Y - Rehabilitation Services	Y - Respiratory Services	N - Self Care Unit
Y - Shock Trauma	Y - Social Services	Y - Speech Pathology

NA =	Not applicable	NMF =	No meaningful figure	NR =	Not reported
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